

SOUTH DAKOTA DEPARTMENT OF AGRICULTURE

Division of Agricultural Services
523 East Capitol, Foss Building
Pierre, South Dakota 57501-3182
Telephone: (605)773-4432 Fax: (605)773-3481

**Pesticide
Notice of Inspection**

Name (Owner, Operator or Agent) (b) (6)	Title Land owner	Signature (b) (6)
Firm Name (Number, Street, City, State and Zip Code) (b) (6)		
Printed Name / Signature of Inspector Jeff Lunsberg		Date 7-14-17
Reason for Inspection 3:10 PM		
<input checked="" type="checkbox"/> For the purpose of inspection and obtaining samples of any pesticides or devices packages, labeled and released for shipment, and samples of any containers or labeling for such pesticides or devices. In places where pesticides or devices are held for distribution, sale or use under State or Federal Laws.		
<input checked="" type="checkbox"/> For the purpose of inspecting and obtaining copies of those records specified by State and/or Federal laws		
<input checked="" type="checkbox"/> For the purpose of inspecting sites when pesticides are being used to collect data on the use of pesticides and to determine whether pesticides are being used in compliance with State or Federal laws.		
<input checked="" type="checkbox"/> For the purpose of inspecting sites where pesticides have been used to determine whether the pesticides were used in compliance with the State or Federal laws.		
<input type="checkbox"/> Dealer <input type="checkbox"/> Licensed Dealer <input checked="" type="checkbox"/> Other land owner		
Credentials Presented To: (b) (6)		
Comments: To investigate spray drift complaint 17L16		

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SEP 25 2017

Department of Agriculture
Div. of Ag Services

DEPARTMENT OF AGRICULTURE

Division of Regulatory Services
523 East Capitol, Foss Building
Pierre, South Dakota 57501
Telephone: (605)773-4432

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JUL 24 2017
Department of Agriculture
Division of Regulatory Services

Voluntary Statement

I made the following voluntary statement of fact to Jeff Lonnshery of
the South Dakota Department of Agriculture on 7-14-17 Pesticide Inspector
Date

On July 13th, 2017, at approximately 5:40 pm until 6 pm, a crop cluster sprayed with 50 feet of the ^{South} boundary of our farm and it drifted onto us persons, our pets, chickens house, equipment in the driveway, and in our garage. We experienced rashes, headache, stomach upset, sore throat, dry mouth, and eye irritation. We were standing in the road trying to stop him because the wind was coming up and it was a fog of vapor drifting on our grass + pets. The applicator flew over our certified organic property 2x. The first time right over our trees by our house.
I, the undersigned have either written the above statement or reviewed it and, hereby swear and affirm that the above statement is a true and accurate account of the facts as they are known to me in connection with the subject matter of the statement.

X (b) (6) _____
Signature - Witness
X 7/14/17 _____
Date
(b) (6) _____
Printed Name
(b) (6) _____
Phone Number
(b) (6) _____

Office - White

Witness - Canary

Inspector - Pink

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JUL 24 2017

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Department of Agriculture
Div. of Ag Services

Pesticide Damage Complaint Form

1. Claimant's Name: (b) (6) Phone Number: (b) (6)
Address: (b) (6)
2. County: (b) (6) Legal Description of Damage Property: (b) (6)

3. Property Damage: overspray and drift of insecticide and fungicide
4. Describe Damage: on certified organic grass trees, bushes. Drift exposure to self + husband while standing on the road in front of our land + house. Strong smell in house + garage. Pets + chickens exposed to drift.
5. Type of Application: Ground () Aerial ()

6. Facts of Application: Date: 7/13/17 Time (Approximate): 5:35 - 6:00 pm

Weather Conditions (i.e. wind direction, wind speed, temperature, relative humidity):

wind speed 9-10 mph West + South 90 degrees 70%

7. Legal description of crop on which application of pesticide was made: certified organic grass + poultry

8. Owner of crop on which application was made: (b) (6)

9. Person applying pesticides (if known): Crop Care Aerial Spraying LLC

10. Have you talked to the person that applied the pesticides? Yes () No (X)

If so, give results:

11. Witnesses, if any:

Name	Address	Phone Number
(b) (6)	(b) (6)	(b) (6)

12. Additional Comments: we are certified organic by MASA and registered as a sensitive farm. The organic inspector will be here on Aug 4th to determine how much land was affected and will be de-certified from drift.

Date: July 15 2017

(b) (6)

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Pesticide Damage Complaint Form

1. Claimant's Name: (b) (6) Signature: (b) (6) Date: 7/15/17

2. Sketch location of damaged area, indicating section, location and size of area alleged to be damaged.

1/2

North

West

South

Lot (b) (6)

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(b) (6)

(b) (6)

Additional comments: It affected the front 200-300ft of my parcel and my rented parcel - (b) (6)
It is planted in high legume pasture for 60

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Pesticide Notice of Inspection

Name (Owner, Operator or Agent) <i>Jeff Mount</i>	Title <i>Owner</i>	Signature (b) (6)
Firm Name (Number, Street, City, State and Zip Code) <i>Crow Creek Aerial Spraying</i> (b) (6)		
Printed Name / Signature of Inspector <i>Jeff Lennsberg</i> (b) (6)		Date <i>7/18/17</i>
Reason for Inspection <input checked="" type="checkbox"/> For the purpose of inspection and obtaining samples of any pesticides or devices packages, labeled and released for shipment, and samples of any containers or labeling for such pesticides or devices. In places where pesticides or devices are held for distribution, sale or use under State or Federal Laws. <input checked="" type="checkbox"/> For the purpose of inspecting and obtaining copies of those records specified by State and/or Federal laws <input checked="" type="checkbox"/> For the purpose of inspecting sites when pesticides are being used to collect data on the use of pesticides and to determine whether pesticides are being used in compliance with State or Federal laws. <input checked="" type="checkbox"/> For the purpose of inspecting sites where pesticides have been used to determine whether the pesticides were used in compliance with the State or Federal laws.		
<input type="checkbox"/> Dealer <input checked="" type="checkbox"/> Licensed Dealer <input type="checkbox"/> Other <i>applicator</i>		
Credentials Presented To: <i>Jeff Mount</i> Comments: <i>To investigate possible drift on property @</i> <i>(b) (6)</i> <i>from July 12th 2017</i>		

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Div. of Ag Services

DEPARTMENT OF AGRICULTURE

Division of Regulatory Services
523 East Capitol, Foss Building
Pierre, South Dakota 57501
Telephone: (605)773-4432

Voluntary Statement

I made the following voluntary statement of fact to Jeff Lunsberg of
the South Dakota Department of Agriculture on 7/18/17 Pesticide Inspector
Date

See Spray Report

I, the undersigned have either written the above statement or reviewed it and, hereby swear and affirm that the above statement is a true and accurate account of the facts as they are known to me in connection with the subject matter of the statement.

X (b) (6)

Signature – Witness

Blaine Iverson

Printed Name

X 7-18-17

Date

(b) (6)

Phone Number

Address

Office – White

Witness – Canary

Inspector - Pink

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Department of Agriculture
Div. of Agriculture

TOTAL ACRES 76		NAME/PHONE NUMBER (b) (6)		BILLING ADDRESS		<input type="checkbox"/> ONFILE	
FIELD A	MAPPED Y / N	QUARTER (b) (6)	SECTION (b) (6)	TOWNSHIP (b) (6)	RANGE (b) (6)	ACRES 76	CROP Corn
NOTES				CHEMICAL Tripro Buzada Endowder		13.7 5.12 3 pt	
FIELD B	MAPPED Y / N	QUARTER	SECTION	TOWNSHIP	RANGE	ACRES	CROP
NOTES				CHEMICAL			
FIELD C	MAPPED Y / N	QUARTER	SECTION	TOWNSHIP	RANGE	ACRES	CROP
NOTES				CHEMICAL			
FIELD D	MAPPED Y / N	QUARTER	SECTION	TOWNSHIP	RANGE	ACRES	CROP
NOTES				CHEMICAL			

ACRES IN THIS ENVELOPE Corn Can	LOAD CALCULATION
(b) (6)	<div style="text-align: right;"> RECEIVED SEP 25 2017 Department of Agriculture Div. of Ag Services </div>

MAP A	
APPLICATOR NAME BLAINE IVERSON (b) (6)	JEFF MOUNT (b) (6) OTHER
APPLY DATE 7-12-17	TIME 530-6 pm
CHEMICAL NAME Tripro Buzada	100-16 EPA REG. NUMBER 279-3318
TREATMENT PURPOSE Plant Health	RATE (OZ/ACRE) 13.7 5.12
°F 83 %H 70 WIND DIRECTION N NE E SE S SW W NW	GALLON / ACRE 1 1.5 2 2.5 3 3.5 4 4.5 5 3-6 WIND SPEED 3-6
MAP B	
APPLICATOR NAME BLAINE IVERSON AP11949	JEFF MOUNT AP11828 OTHER
APPLY DATE	TIME
CHEMICAL NAME	EPA REG. NUMBER RATE (OZ/ACRE)
TREATMENT PURPOSE	GALLON / ACRE 1 1.5 2 2.5 3 3.5 4 4.5 5
°F %H WIND DIRECTION N NE E SE S SW W NW	WIND SPEED

South Dakota Department of Agriculture
Division of Agricultural Services
523 East Capitol, Foss Building
Pierre, SD 57501-3182
Phone (605) 773-3724 FAX (605) 773-3481

PESTICIDE USE INSPECTION REPORT

☒ Agricultural ☐ Non-Agricultural

1. Person Interviewed or Source of Information			
A. Name Jeff Mount		C. Address	
B. Company		D. Telephone	
2. Applicator			
A. Name Crop Care Aerial Spraying		B. Address (b) (6)	
C. Telephone (b) (6)		D. Certification or License No. (b) (6)	
3. Site of Application			
A. Name Blaine Iverson		B. Address 76 Acres Corn	
C. Telephone (b) (6)		D. Type of Business	
E. Site Treated		F. Target Pest rootworm beetle fungicide for plant health	
G. Area Treated (acres, etc.) 76 Acres		H. Location of Site (b) (6)	
I. Date and Time of Application 7-12-17 5:30-6 PM		J. Weather at Time of Application (Wind, Temperature, Humidity, Rain, etc.) List Source of Information 83°F N wind NW 3-6	
4. Pesticide Applied			
A. Brand Name Triplo Brigade	B. EPA Reg No 100-1613 297-3313	C. BATCH NO or LOT NO RUP	D. GEN. or UNCLASSIFIED USE <input checked="" type="checkbox"/> RES USE <input checked="" type="checkbox"/>
5. Rate of Application Triplo 13.7 oz/A Brigade 5.12 oz/A			
A. Method Of Application <input type="checkbox"/> GROUND <input checked="" type="checkbox"/> AERIAL <input type="checkbox"/> OTHER (Specify)			
Equipment Used PA 235	Speed 100 mph	Pressure 30	Nozzle Type CP 11's
B. Dilution Rate 2 g/A			
C. Diluted Material Applied Per Unit (gallons/acre)		D. Actual Active Per Unit (lbs/acre)	
6. Worker Protection Standard (Agricultural Use Only)			
Personal Protective Equipment provided and used according to label.			<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Safety, Poster, Medical Facility Info and Pesticide Application Info and Central Location.			<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Workers and Handlers have had required Pesticide Safety Training.			<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Decontamination Site provided as required.			<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Emergency assistance provided for workers and handlers.			<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Workers kept out of treated area during application and REI.			<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Early Entry Protection provided.			<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Oral warnings and Posted warning signs provided as required.			<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
7. Ground Water and Endangered Species			
Were labeling directions for protection of groundwater followed?			<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Were labeling for protection of endangered species followed?			<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
8. Consequences of Use (List any unusual results or adverse effects or violations resulting from treatment)			
9. Samples Collected (List collection reports involved by sample number) 03JL18, 04JL18, 05JL18, 08JL18			
Was the application observed by the inspector? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> (b) (6)			
10. Date of Investigation 7/18/17	11. Time 2:15 PM	13. Title SDPA Inspector	

Office - White

Lab - Canary

Inspector -

Dealer - Goldenrod

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Yankton, SD

Gurney Municipal

© 11:53 AM CDT on July 17, 2017 (GMT -0500)

Weather History for KYKN - July, 2017

July

12

2017

View

Wednesday, July 12, 2017

Daily	Weekly	Monthly	Custom			
				Actual	Average	Record
Temperature						
Mean Temperature				79 °F	79 °F	86 °F
Max Temperature				86 °F	88 °F	105 °F (1954)
Min Temperature				70 °F	64 °F	48 °F (1975)
Cooling Degree Days				14	14	14
Growing Degree Days				29 (Base 50)	29	29
Moisture						
Dew Point				67 °F	67 °F	70 °F
Average Humidity				71	71	71
Maximum Humidity				100	100	100
Minimum Humidity				44	44	44
Precipitation						
Precipitation				0.00 in	0.00 in	- ()
Sea Level Pressure						
Sea Level Pressure				29.91 in	29.91 in	29.91 in
Wind						
Wind Speed				6 mph (NNW)	6 mph	15 mph
Max Wind Speed				15 mph	15 mph	15 mph
Max Gust Speed				15 mph	15 mph	15 mph
Visibility				9 miles	9 miles	9 miles

SEP 25 2017

Actual

Average

Record

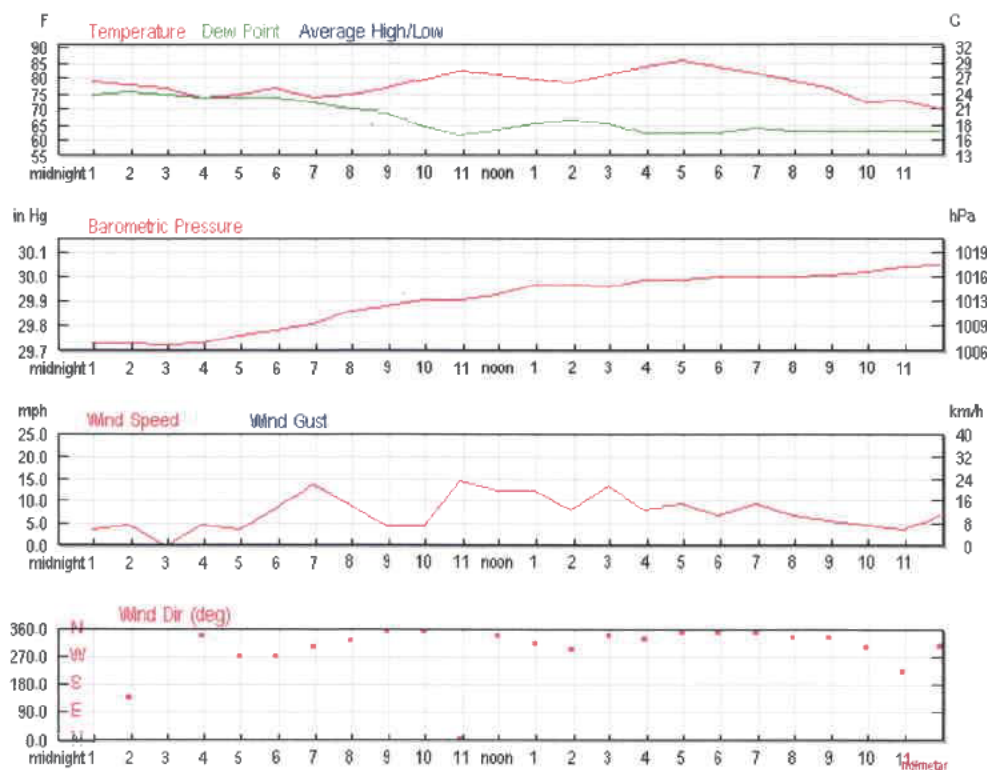
Events

Averages and records for this station are not official NWS values.

T = Trace of Precipitation, MM = Missing Value

Source: NWS Daily Summary

Daily Weather History Graph



Search for Another Location

Airport or City:

KYKN

Submit

Trip Planner

Search our weather history database for the weather conditions in past years. The results will help you decide how hot, cold, wet, or windy it might be!

Date:

July

12

Submit

SEP 25 2017

Astronomy

Jul. 12, 2017	Rise	Set
Actual Time	6:02 AM CDT	9:08 PM CDT
Civil Twilight	5:27 AM CDT	9:42 PM CDT
Nautical Twilight	4:43 AM CDT	10:26 PM CDT
Astronomical Twilight	3:51 AM CDT	11:18 PM CDT
Moon	11:18 PM CDT (7/12)	9:25 AM CDT (7/12)
Length of Visible Light	16h 14m	
Length of Day	15h 05m	

Waning Gibbous, 88% of the Moon is Illuminated

Jul 12	Jul 16	Jul 23	Jul 30	Aug 7
Waning Gibbous	Last Quarter	New	First Quarter	Full

SEP 25 2017

Hourly Weather History & Observations

Time (CDT)	Temp.	Heat Index	Dew Point	Humidity	Pressure	Visibility	Wind Dir	Wind Speed	Gust Speed	Precip	Events	Conditions
12:56 AM	79.0 °F	-	75.0 °F	88%	29.73 in	10.0 mi	North	3.5 mph	-	N/A		Clear
1:56 AM	78.1 °F	-	75.9 °F	93%	29.73 in	10.0 mi	SE	4.6 mph	-	N/A		Clear
2:56 AM	77.0 °F	-	75.0 °F	94%	29.72 in	7.0 mi	Calm	Calm	-	N/A		Clear
3:56 AM	73.9 °F	-	73.9 °F	100%	29.73 in	3.0 mi	NNW	4.6 mph	-	N/A		Clear
4:56 AM	75.0 °F	-	73.9 °F	96%	29.76 in	5.0 mi	West	3.5 mph	-	N/A		Clear
5:56 AM	77.0 °F	-	73.9 °F	90%	29.78 in	10.0 mi	West	8.1 mph	-	N/A		Clear
6:56 AM	73.9 °F	-	72.0 °F	93%	29.81 in	7.0 mi	NW	13.8 mph	-	N/A		Clear
7:56 AM	75.0 °F	-	70.0 °F	84%	29.86 in	10.0 mi	NNW	9.2 mph	-	N/A		Clear
8:56 AM	77.0 °F	-	69.1 °F	76%	29.88 in	10.0 mi	North	4.6 mph	-	N/A		Clear
9:56 AM	80.1 °F	81.9 °F	64.9 °F	60%	29.91 in	10.0 mi	North	4.6 mph	-	N/A		Clear
10:56 AM	82.9 °F	83.7 °F	62.1 °F	49%	29.91 in	10.0 mi	North	15.0 mph	-	N/A		Clear
11:56 AM	82.0 °F	83.4 °F	64.0 °F	54%	29.93 in	10.0 mi	NNW	12.7 mph	-	N/A		Clear

Time (CDT)	Temp.	Heat Index	Dew Point	Humidity	Pressure	Visibility	Wind Dir	Wind Speed	Gust Speed	Precip	Events	Conditions
12:56 PM	80.1 °F	82.1 °F	66.0 °F	62%	29.97 in	10.0 mi	NW	12.7 mph	-	N/A		Clear
1:56 PM	79.0 °F	-	66.9 °F	66%	29.97 in	10.0 mi	WNW	8.1 mph	-	N/A		Clear
2:56 PM	82.0 °F	84.1 °F	66.0 °F	58%	29.96 in	10.0 mi	NNW	13.8 mph	-	N/A		Clear
3:56 PM	84.0 °F	84.5 °F	62.1 °F	47%	29.99 in	10.0 mi	NNW	8.1 mph	-	N/A		Clear
4:56 PM	86.0 °F	86.3 °F	62.1 °F	44%	29.99 in	10.0 mi	North	9.2 mph	-	N/A		Clear
5:56 PM	84.0 °F	84.5 °F	62.1 °F	47%	30.00 in	10.0 mi	North	6.9 mph	-	N/A		Clear
6:56 PM	82.0 °F	83.4 °F	64.0 °F	54%	30.00 in	10.0 mi	North	9.2 mph	-	N/A		Clear
7:56 PM	79.0 °F	-	63.0 °F	58%	30.00 in	10.0 mi	NNW	6.9 mph	-	N/A		Partly Cloudy
8:56 PM	77.0 °F	-	63.0 °F	62%	30.01 in	10.0 mi	NNW	5.8 mph	-	N/A		Overcast
9:56 PM	72.0 °F	-	63.0 °F	73%	30.02 in	10.0 mi	NW	4.6 mph	-	N/A		Clear
10:56 PM	73.0 °F	-	63.0 °F	71%	30.04 in	10.0 mi	SW	3.5 mph	-	N/A		Mostly Cloudy
11:56 PM	70.0 °F	-	63.0 °F	78%	30.05 in	10.0 mi	NW	6.9 mph	-	N/A		Clear

For phone 7/17/17

Jeff said they were aware of the sensitive sites registry.

SEP 25 2017

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Aerial Map



map center: (b) (6)

0ft

1060ft

211'

(b) (6)

SEP 25 2017



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RESTRICTED USE PESTICIDE

Toxic to fish and aquatic organisms.
For retail sale to and use only by certified applicators, or persons under their direct supervision and only for the uses covered by the certified applicator's certification.

GROUP 3A INSECTICIDE

Brigade[®] 2EC
Insecticide/Miticide

EPA Reg. No. 279-3313

T EPA Est. 072344-MO-004 M EPA Est. 279-NY-1
R EPA Est. 62171-MS-001 S EPA Est. 39578-TX-1
C EPA Est. 70815-GA-001 W EPA Est. 279-IL-1

EPA Establishment Numbers (The letter before each Establishment Number above corresponds to the first letter in the lot number on the container label.)

Active Ingredient:

	By Wt.
Bitenthrin: (2 methyl[1,1'-biphenyl]-3-yl) methyl 3-(2-chloro-3,3,3-trifluoro-1-propenyl)-2,2-dimethyl-cyclopropanecarboxylate*	25.1%
Other Ingredients:**	74.9%
	100.0%

This product contains 2 pounds active ingredient per gallon.

*Cis isomers 97% minimum, trans isomers 3% maximum.

**Contains xylene range aromatic solvents.

Sold By

FMC

FMC Corporation
2929 Walnut Street
Philadelphia, PA 19104

09-17-15



ALL-WEATHER FORMULA

KEEP OUT OF REACH
OF CHILDREN

WARNING - AVISO

This label must be in the possession of the user at the time of application.

Si usted no entiende la etiqueta, busque a alguien para que se la explique a usted en detalle. (If you do not understand the label, find someone to explain it to you in detail.)

See booklet for additional precautionary information.

Net Contents: 1 Gallon

10056045 - 15127154

49

GROUP 3 | 7 | 11 FUNGICIDE

PULL HERE TO OPEN ►



TrivaproTM

Fungicide

syngenta®

Active Ingredients:

Benzovindiflupyr*	2.9%
Azoxystrobin**	10.5%
Propiconazole***	11.9%

Other Ingredients: 74.7%

Total: 100.0%

*CAS No. 1072957-71-1

**CAS No. 131860-33-8

***CAS No. 60207-90-1

Trivapro Fungicide is formulated as a suspo-emulsion and contains 0.25 lb of benzovindiflupyr, 0.92 lb of azoxystrobin, and 1.04 lb of propiconazole active ingredients per gallon.

KEEP OUT OF REACH OF CHILDREN.

WARNING/AVISO

Si usted no entiende la etiqueta, busque a alguien para que se la explique a usted en detalle. (If you do not understand the label, find someone to explain it to you in detail.)

See additional precautionary statements and directions for use inside booklet.

EPA Reg. No. 100-1613

EPA Est. 100-NE-001

SCP 1613A-L1 0217

4076375

2.5 gallons
Net Contents

49

Jackson
vs
Crop Care

South Dakota Department of Agriculture
Division of Agricultural Services
Foss Building, 523 East Capitol
Pierre, SD 57501-3182

Case

17L071316

Sample Collection Report

The following sample was collected and receipt is hereby acknowledged pursuant to state and federal law.

Product Category: Pesticide Investigational Residue					
Sample Number: 03-JL-18		Date: 2017-07-14		Product/Material Sampled: Plant leaf material	
Lot or Invoice# 3		Date Shipped 2017-07-21		# of Containers Sampled 1	Size of Containers qrt.
Owner/Dealer (Name and Complete Address) Angela Jackson (b) (6)				Manufacturer/Registrant (Name and Complete Address)	
Sample Collected and Prepared in the Following Manner: Sampled per manual into a clean glass jar with a teflon lid, placed in an inverted plastic bag and sealed with an official seal. Stored in refrigeration or cooler with ice pack during transport.					
Sample Collection Location Address above		Collection Location Description		Latitude	Longitude
EPA Reg. # (pesticide only): 279-3313 Brigade EPA Est. # (pesticide only):					
Analysis Requested (Listed % guarantee if label not attached):					
Feed/Animal Remedy:		Fertilizer/Soil Amendment:		Pesticide: (List guarantee/analysis requested) 100-1613 Trivapro Fungicide	
Possible Drug Analysis: (Amprolium, Arsanilic Acid, Carbadox, Chlortetracycline, Decoquinat, Dichlorvos, Lasalocid, Monesin, Oxytetracycline, Piperazine, Pyrantel Tartrate / Pamoate, Sulfa-methazine/methox ine/thiazole, Tetracycline Hydrochloride, Tylosin)					
Comments: Test sample for residue of the pesticides listed above.					
The undersigned acknowledges that the sample shown above as obtained from products or devices that were packaged, labeled, and released for shipment or sale, or held for use, received under the supplier or carrier date provided above or that samples were taken from property or product under their control.					
Signature _____ (Owner, Operator or Agent)		Title _____ landowner (Owner, Operator or Agent)			
Signature _____ (Inspector/Investigator)					
Lab Remarks:					

RECEIVED

OCT 01 2017

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OCT 01 2017

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13701316
(acc)

Chain of Custody

(b) (6)

Relinquished By: (Signature) _____

Date: 2017-07-24 Time: _____

Date Shipped: 2017-07-24

Carrier: (Attach Record)

delivered

Received By: (Signature) _____

Date: 2017-07-24 Time: _____

Shipping Receipt:

Sample Pictures



RECEIVED

OCT 01 2017

LABORATORY OF ENVIRONMENTAL & CLIMATE
SCIENCE

South Dakota Department of Agriculture
Division of Agricultural Services
Foss Building, 523 East Capitol
Pierre, SD 57501-3182

Sample Collection Report

The following sample was collected and receipt is hereby acknowledged pursuant to state and federal law.

Product Category: Pesticide Investigational Residue				
Sample Number: 04-JL-18	Date: 2017-07-18	Product/Material Sampled: Plant leaf material.		
Lot or Invoice# 4	Date Shipped 2017-07-21	# of Containers Sampled 1	Size of Containers qrt.	Amount on Hand
Owner/Dealer (Name and Complete Address) (b) (6)			Manufacturer/Registrant (Name and Complete Address)	
Sample Collected and Prepared in the Following Manner: Sampled per manual into a clean glass jar with a teflon lid, placed in an inverted plastic bag and sealed with an official seal. Stored in refrigeration or cooler with ice pack during transport.				
Sample Collection Location Address listed above.	Collection Location Description	Latitude (b) (6)	Longitude (b) (6)	
EPA Reg. # (pesticide only): Brigade, 279-3313		EPA Est. # (pesticide only):		
Analysis Requested (Listed % guarantee if label not attached):				
Feed/Animal Remedy:	Fertilizer/Soil Amendment:	Pesticide: (List guarantee/analysis requested) Trivapro, 100-1613.		
Possible Drug Analysis: (Amprolium, Arsanilic Acid, Carbadox, Chlortetracycline, Decoquinat, Dichlorvos, Lasalocid, Monesin, Oxytetracycline, Piperazine, Pyrantel Tartrate / Pamoate, Sulfa-methazine/methox ine/thiazole, Tetracycline Hydrochloride, Tylosin)				
Comments: Test sample for pesticide residue of the two pesticides listed above.				
The undersigned acknowledges that the sample shown above as obtained from products or devices that were packaged, labeled, and released for shipment or sale, or held for use, received under the supplier or carrier date provided above or that samples were taken from property or product under their control.				
Signature _____ (b) (6) (Owner, Operator or Agent)		Title _____ Land owner (Owner, Operator or Agent)		
Signature _____ (b) (6) (Inspector/Investigator)				
Lab Remarks:				

OCT 01 2017

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